

Via Facsimile: 9-1-571-273-8300

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4518).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**310.00****Complete if Known**

| | |
|----------------------|--------------------|
| Application Number | 10/612539 |
| Filing Date | 07/02/2003 |
| First Named Inventor | CRANE, Laura J |
| Examiner Name | Kavanaugh, John T. |
| Art Unit | 3728 |
| Attorney Docket No. | FC01093Q2 |

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MAY 24 2006**METHOD OF PAYMENT** (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 19-0365 Deposit Account Name: Schering-Plough Corporation

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☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| | | | | | | |
|---|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
| - 20 or HP = | x | = | | | | |
| HP = highest number of total claims paid for, if greater than 20 | | | | | | |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | |
| - 3 or HP = | x | = | | | | |
| HP = highest number of independent claims paid for, if greater than 3 | | | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|---|-----------------|----------------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| - 100 = | / 50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Terminal Disclaimer and IDS

Fees Paid (\$)

310

SUBMITTED BY

| | | | |
|-------------------|---|--|------------------------|
| Signature |  | Registration No. 35161 (Attorney/Agent) | Telephone 908-298-4741 |
| Name (Print/Type) | MATTHEW J. GOLDEN | | Date May 24, 2006 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TOTAL NO. OF PAGES INCLUDING COVER: 20

DATE: May 24, 2006


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Re: Application No. 10/612,539
Examiner: Kavanaugh, John T.
In Re Application of Laura J. Crane
Filed: 07/02/2003
Group Art Unit: 3728
For: Gel Insoles with Lower Heel and Toe Recesses Having Thin spring Walls
Attorney Docket No.: FC01093Q2

Dear Sir/Madam:

Transmitted herewith are:

- Fax Cover Sheet - 1 page
- Certificate of Fax Transmission (sb97) - 1 page
- Transmittal Form (sb21) - 1 page
- Amendment - 8 pages
- Information Disclosure Statement Transmittal - 2 pages
- PTO Form 1449 (sb/08a) - 1 page (10 references cited; 0 references transmitted)
- Terminal Disclaimer - 2 pages
- Petition for Extension of time (sb/22) (3 months) - 1 page IN DUPLICATE
- Fee Transmittal (sb/17) - 1 page IN DUPLICATE


Matthew J. Golden
Patent Director, Reg. No. 35,161

64937_1.DOC

PHONE: (908) 298-4741

FAX: (908) 298-5388

Docket Number: FC01093Q2
Application No: 10/612539
Filing Date: 07/02/2003
First Inventor: CRANE, Laura J

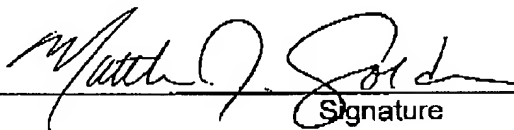
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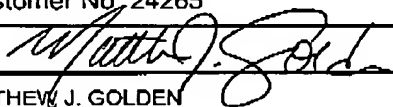
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/612539 | |
| | Filing Date | 07/02/2003 | |
| | First Named Inventor | CRANE, Laura J | |
| | An Unit | 3728 | |
| | Examiner Name | Kavanaugh, John T. | |
| Total Number of Pages in This Submission | 20 | Attorney Docket Number | FC01093Q2 |

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| | | | |
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| Firm Name | Customer No: 24265 | | |
| Signature |  | | |
| Printed name | MATTHEW J. GOLDEN | | |
| Date | May 24, 2006 | Reg. No. | 35161 |

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